

PTO/SB/21 (08-00)

OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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37624

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/033,692
Filing Date	12/19/2001
First Named Inventor	Renzo Dal Molin
Group Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	8707-2135

Total Number of Pages in This Submission

9

ENCLOSURES (check all that apply)

- ☒ Fee Transmittal Form
- ☒ Fee Attached
- ☒ Amendment / Reply
- ☐ After Final
- ☒ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/Incomplete Application
- ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) _____

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please identify below):

37 CFR 3.79(b) Statement
OCT 23 2002

TECHNOLOGY CENTER R3700

Remarks

This submission is an amendment to correct inventorship.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Robert M. Isackson

Signature

Date

10/11/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

10/11/02

Typed or printed name

Lorraine Glorig

Signature

Date

10/11/02

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/033,692	
	Filing Date	12/19/2001	
	First Named Inventor	Renzo Dal Molin	
	Group Art Unit	N/A	
	Examiner Name	N/A	
Total Number of Pages in This Submission	9	Attorney Docket Number	8707-2135

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	37 CFR 3.73(b) Statement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	RECEIVED OCT 23 2002 TECHNOLOGY CLASSIFICATION
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	This submission is an amendment to correct inventorship.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert M. Isackson
Signature	
Date	10/11/02

CERTIFICATE OF MAILING			
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Typed or printed name	Lorraine Glorig		
Signature		Date	10/11/02

OCT 16 2002

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

130.00

Complete if Known

Application Number	10/033,692
Filing Date	12/19/2001
First Named Inventor	Renzo Dal Molin
Examiner Name	N/A
Group Art Unit	N/A
Attorney Docket No.	8707-2135

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 15-0665

Deposit Account Name

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent Claims	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
105 130	205 65	Surcharge - late filing fee or oath
127 50	227 25	Surcharge - late provisional filing fee or cover sheet
139 130	139 130	Non-English specification
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination
112 920*	112 920*	Requesting publication of SIR prior to Examiner action
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action
115 110	215 55	Extension for reply within first month
116 400	216 200	Extension for reply within second month
117 920	217 460	Extension for reply within third month
118 1,440	218 720	Extension for reply within fourth month
128 1,960	228 980	Extension for reply within fifth month
119 320	219 160	Notice of Appeal
120 320	220 160	Filing a brief in support of an appeal
121 280	221 140	Request for oral hearing
138 1,510	138 1,510	Petition to institute a public use proceeding
140 110	240 55	Petition to revive - unavoidable
141 1,280	241 640	Petition to revive - unintentional
142 1,280	242 640	Utility issue fee (or reissue)
143 460	243 230	Design issue fee
144 620	244 310	Plant issue fee
122 130	122 130	Petitions to the Commissioner
123 50	123 50	Processing fee under 37 CFR 1.17(q)
126 180	126 180	Submission of Information Disclosure Stmt
581 40	581 40	Recording each patent assignment per property (times number of properties)
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))
179 740	279 370	Request for Continued Examination (RCE)
169 900	169 900	Request for expedited examination of a design application
Other fee (specify)		Inventorship Correction

130.00

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

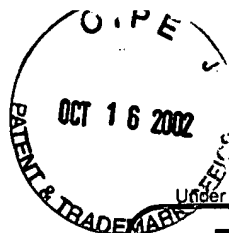
130.00

SUBMITTED BY

Name (Print/Type)	Robert M. Isackson	Registration No. (Attorney/Agent)	31,110	Telephone	212-506-5000
Signature				Date	10/11/02

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☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims: -20** = X =
Independent Claims: -3** = X =
Multiple Dependent: =

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

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FEE CALCULATION (continued)

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Other fee (specify) <u>Inventorship Correction</u>				130.00	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 130.00

SUBMITTED BY

Name (Print/Type)	Robert M. Isackson	Registration No. (Attorney/Agent)	31,110	Telephone	212-506-5000
Signature		Date	10/1/02		

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